

EXHIBIT 15

(19) World Intellectual Property
Organization
International Bureau



(43) International Publication Date
2 June 2005 (02.06.2005)

PCT

(10) International Publication Number
WO 2005/049044 A1

(51) International Patent Classification⁷: **A61K 31/702**,
31/715, 39/395, A61P 35/00, C07K 16/32

(21) International Application Number:
PCT/EP2004/013119

(22) International Filing Date: 29 October 2004 (29.10.2004)

(25) Filing Language: English

(26) Publication Language: English

(30) Priority Data:
10/698,034 30 October 2003 (30.10.2003) US

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(81) Designated States (*unless otherwise indicated, for every kind of national protection available*): AE, AG, AL, AM,

AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW.

(84) Designated States (*unless otherwise indicated, for every kind of regional protection available*): ARIPO (BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW), Eurasian (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European (AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR), OAPI (BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG).

Declaration under Rule 4.17:

— *of inventorship (Rule 4.17(iv)) for US only*

Published:

— *with international search report*
— *before the expiration of the time limit for amending the claims and to be republished in the event of receipt of amendments*

For two-letter codes and other abbreviations, refer to the "Guidance Notes on Codes and Abbreviations" appearing at the beginning of each regular issue of the PCT Gazette.

(54) Title: OLIGO-BETA-(1, 3) -GLUCAN AND MONOCLONAL ANTIBODIES AGAINST CANCER

(57) Abstract: The present invention relates to a therapeutical method comprising administration of a composition comprising a monoclonal antibody with an oligo- β -(1,3)-glucan and a pharmaceutically acceptable carrier, to a human being or to a warm-blood animal suffering from cancer in an amount which is effective to treat the cancer.



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OLIGO-BETA-(1,3)-GLUCAN AND MONOCLONAL ANTIBODIES AGAINST CANCER

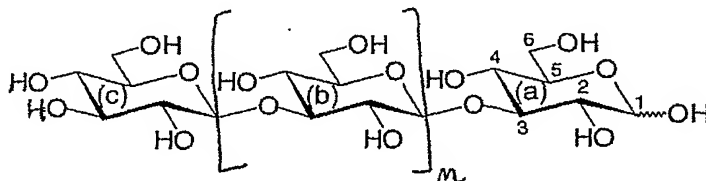
The present invention relates to a therapeutical treatment in which a monoclonal antibody is administered with a oligo- β -(1,3)-glucan to patients suffering from cancer and to drugs used in said treatment.

More particularly, it relates to a method of treatment of humans and warm-blood animals suffering from cancer.

Glucans which are natural products have been studied extensively and are known as presenting immunostimulating activities. However, it has already been observed that not every compound comprised into naturally occurring glucans are active.

Among the already studied glucans, laminarin can be cited as presenting immunostimulant activities and consequently as being useful in therapeutical treatments, in particular for patient suffering from cancer, as disclosed e.g. in the International patent application WO03/045414 in the name of the present inventors.

Furthermore, the Applicants have also found that some of specific oligo- β -(1,3)-glucans also present an immunostimulating activity. Those oligo- β -(1,3)-glucans are those presenting the following formula:



in which $n=1$ to 10, preferably, $n=2$ or $n=3$,
or a pharmaceutically acceptable salt thereof.

Monoclonal antibodies are typically made by fusing a
normally short-lived, antibody-producing B cell (see
5 immunity) to a fast-growing cell, such as a cancer cell
(sometimes referred to as an "immortal" cell). The
resulting hybrid cell, or hybridoma, multiplies rapidly,
creating a clone that produces large quantities of the
antibody. Monoclonal antibodies engendered much excitement
10 in the medical world in the 1980's, especially as potential
cures for cancer.

In order to use these antibodies in treatments against
cancer, the searchers need to find antigens on the surface
of cancer cells which were found only on those cancer cells
15 and were not found on normal tissues, and then produce
monoclonal antibodies to those antigens.

The theory is that these monoclonal antibodies could
then recognize the antigen on the cancer cells and lock on
to it (like a key in a lock). This might then trigger the
20 body's immune system to attack the cancer cells.
Alternatively the monoclonal antibody could have a cancer
drug or a radioactive substance attached to it and be used
to deliver treatment directly to the cancer (this was
called targeted therapy or the "magic bullet").

25 In the last twenty five years a great deal of research
has gone into both looking for antigens on cancer cells and
improving production of monoclonal antibodies so that the
large quantities necessary for medical use could be made.

However the demand for treatments against cancer which are very effective and not harmful continues to exist.

In WO02/058711, the use of Laminarin in combination with monoclonal antibody is disclosed, but it is considered that glucans presenting a higher molecular weight, in particular Barley glucans, are most effective.

Surprisingly and unexpectedly, despite the teaching of WO02/058711, the present inventors found that monoclonal antibody and oligo- β -(1,3)-glucan has a synergistic effect on the treatment of cancer.

The present invention is based on said synergistic effect.

An object of the present invention is thus a therapeutical method comprising administration of a composition comprising a monoclonal antibody with an oligo- β -(1,3)-glucan and a pharmaceutically acceptable carrier, to a human being or to a warm-blood animal suffering from cancer in an amount which is effective to treat the cancer.

Another object of the invention is the use of a composition comprising a monoclonal antibody with an oligo- β -(1,3)-glucan and a pharmaceutically acceptable carrier, for the manufacture of a medicament for the treatment of cancer.

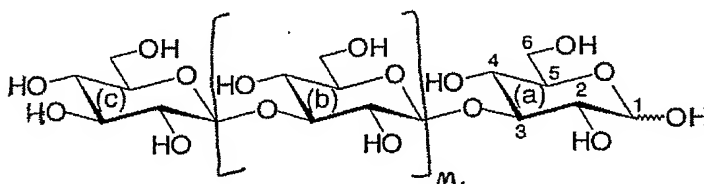
Throughout the specification the amount of active composition is considered as "effective" if it allows the obtention of the contemplated medical end such as control or destruction of cancer cells without producing unacceptable toxic symptoms. Said effective amount will vary with factors such as the particular condition being

treated, the physical condition of the patients and the duration of the treatment.

The "pharmaceutical acceptable carrier" is selected from the group comprising pharmaceutically acceptable solvents, suspending agents or vehicles, and in function of the chosen route selected for administration, and keeping in mind standard pharmaceutical practice; "acceptable" means that the carrier is compatible with the other ingredients of the formulation and not injurious to the patient.

More generally, a "pharmaceutically acceptable component" should not present or induce undue adverse side effects such as toxicity, irritation, and allergic response and should be commensurate with a reasonable benefit/risk ratio.

The oligo- β -(1,3)-glucan is a compound presenting the following formula (1):



20

in which $n=1$ to 10, preferably, $n=2$ or 3,
or a pharmaceutically acceptable salt thereof.

Advantageously, the active oligo- β -(1,3)-glucans are those of Formula I above,

25 in which $n=2$, i.e. β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranose, which is called Laminaritetraose, or

in which $n=3$, i.e. the β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranosyl-(1 \rightarrow 3)- β -D-glucopyranose, which is called Laminaripentaose.

5 Those compounds can be synthesized by de-protection and purification of the compounds prepared according to the process disclosed in WO01/57053 in the name of the Assignee. Methods of de-protection and purification usable are described with reference to laminaribiose in FR2777281.

10 In the method according to the invention, the monoclonal antibody is any monoclonal antibody specific to molecular determinants present on cancer cells and simultaneously able to activate complement.

Advantageously, the monoclonal antibody is selected
15 from the group comprising Herceptin, Alemtuzumab, Rituximab, Tositumomab, Campath, Cetuximab (Erbitux®), Edrecolomab, Mylotarg, Panorex, Pentumobab.

The method according to the invention is suitable to treat cancer, specifically, leukemia, adenocarcinoma,
20 breast cancer, lung cancer, ovarian cancer, oesophagus cancer, stomach cancer, intestinal cancer, non-Hodgkin lymphoma or colon cancer.

Since the monoclonal antibody is administered with an oligo- β -(1,3)-glucan, the therapy can be called
25 "combination therapy".

Combination therapy can be sequential, which means that the treatment is carried out with one agent first and then with the second agent; or it can be simultaneous,

which means that both agents are administered at the same time.

In the method according to the invention, the effective amount of either β -(1,3)-glucan like Laminarin or
5 oligo- β -(1,3)-glucan is 2 to 20mg/kg when administered orally for a sequential treatment. The amount of monoclonal antibody is the conventional amount used in treatment of cancers.

According to another object of the invention, the
10 method according to the invention further comprises administration of a chemotherapeutic agent for an enhanced potentiation.

The method according to the invention can also be used in combination with radiotherapy treatment.

15 According to another object of the invention, when the method further comprises administration of a chemotherapeutic agent or a radiotherapy phase treatment, the monoclonal antibody can be administered in combination with Laminarin.

20 Laminarin is a naturally occurring glucan which is extracted from brown algae and which consists in polysaccharides with an average molecular weight between about 2,500 to 6,000.

A commercially available laminarin is marketed by the
25 Assignee for other purposes.

The present invention also relates to the compositions useful in the above mentioned therapeutical method.

According to the present invention, the composition for use in a sequential or simultaneous treatment can be administered intravenously to the patient, under the form of injections, ointment, pulmonary spray; for use in a sequential treatment the composition can also be administered in the following way: the monoclonal antibody is administered intraperitoneally or intravenously while the oligo- β -(1,3)-glucan, or eventually the Laminarin, is administered orally to the patient, under the form of a solution, suspension, syrup, tablet, capsule.

It can also be presented as a bolus, an electuary, or a paste.

Oral formulations of oligo- β -(1,3)-glucan, or eventually Laminarin, suitable for a sequential treatment in connection with the practice of the present invention include capsules, gels, cachets, tablets, effervescent or non-effervescent powders, tablets, or granules ; they may consist of a solution, or suspension in an aqueous or non-aqueous liquid, of an oil-in-water liquid emulsion or of a water-in-oil emulsion.

Generally, the said oral formulations may be prepared by uniformly mixing the active ingredient, i.e. especially, soluble oligo- β -(1,3)-glucan, or eventually Laminarin, eventually together with a chemotherapeutic agent, with liquid carriers or finely divided solid carriers or both, and then if necessary by shaping the product.

Suitable solid carriers comprise lactose, sucrose, gelatin, agar and bulk powders.

Suitable liquid carriers include water, pharmaceutically acceptable fats and oils, alcohols or other organic solvents, including esters, emulsions, syrups or elixirs, suspensions, solutions and/or suspensions, and
5 solutions and or suspensions reconstituted from non-effervescent granules and effervescent preparations reconstituted from effervescent granules.

They also may contain, for example, preservatives, emulsifying agents, suspending agents, diluents,
10 sweeteners, thickeners, and melting agents; preferred liquid carriers are edible oils, for example, corn or canola oils, as well as, polyethylene glycols (PEG).

The therapeutical forms, intended for oral administration, may comprise a non-toxic, pharmaceutically
15 acceptable, inert carrier selected from the group comprising lactose, starch, sucrose, glucose, methyl cellulose, magnesium stearate, dicalcium phosphate, calcium sulfate, mannitol, sorbitol, cyclodextrin, and cyclodextrin derivatives, or the like.

20 Capsules or tablets containing an oligo- β -(1,3)-glucan, or eventually Laminarin, according to the invention should preferably be easily formulated and made easy to swallow or to chew. Tablets may contain suitable carriers, binders, lubricants, diluents, disintegrating agents,
25 coloring agents, flavoring agents, flow-inducing agents, or melting agents. A tablet may be produced by compression or molding, optionally with one or more classical additional ingredients.

Compressed tablets may be prepared by compressing the active ingredient in a free flowing form (e.g., powder, granules) optionally mixed with a binder (e.g., gelatin, hydroxypropylmethylcellulose), lubricant, inert diluent, preservative, disintegrant (e.g., sodium starch glycolate starch, gelatin, natural sugars such as glucose or beta-lactose, corn sweeteners, natural and synthetic gums such as, sodium alginate, carboxymethylcellulose, polyethylene glycol, waxes, or the like. Lubricants used in these dosage forms include sodium oleate, sodium stearate, magnesium stearate, sodium acetate, sodium chloride, or the like. Disintegrating agents include, for example, starch, methyl cellulose, agar, bentonite, xanthan gum or the like. Molded tablets are made by molding in a suitable machine a mixture of the powdered active ingredient moistened with an inert liquid diluent.

The tablets are optionally coated and may be formulated so as to provide slow-or controlled-release of the active ingredient. Tablets may also optionally be provided with an enteric coating to provide release in parts of the gut other than the stomach.

The following examples are intended to illustrate the invention in particular, to illustrate the synergistic effect of a monoclonal antibody, specifically Herceptin, with Laminarin on the tumor growth.

EXAMPLES

In the examples, the following products are used:

Phycarine[®]: Laminarin extracted from brown algae by
5 Laboratoires Goëmar.

Herceptin: manufactured by Genentech,

Laminaritetraose: synthetised according to US10/668,665,

Laminaripentaose: synthetised according to US10/668,665.

10 **Example 1: Effect on the tumor growth:**

Female nude mice (*nu/nu*) between 5 and 6 weeks of age weighing approximately 20g were obtained from Harlan, Inc. (Madison, WI). The BT-474 human breast carcinoma cell line was obtained from the American Type Culture Collection
15 (ATCC). BT-474 was established by E. Lasfargues and W.G. Coutinho from a solid carcinoma of the breast obtained from a 60-year old female patient (2). Twenty-one-day release 17β -estradiol pellets at 0.25mg (Innovative Research of America) were implanted subcutaneously into each mouse. The
20 following day, animals were implanted s.c. by trocar with fragments of human tumor carcinomas harvested from s.c. growing tumors in nude mice hosts. When the tumors were approximately 40mg in size (24 days following inoculation), the animals were pair-matched into treatment and control
25 groups. All of the groups contained 9 mice. All of the animals were ear-tagged and followed individually throughout the experiment.

The mice of each group were administered intra peritoneally with 2 ml of the following composition:

30 Group 1: (control) sterile H₂O, 5 times a day

Group 2: Herceptin 0.5mg/kg, twice a week during 3 weeks

Group 3: Phycarine[®] 250mg/kg, once a day for 5 days

Group 4: Phycarine[®] 250 mg/kg, once a day for 5 days

Herceptin 0.5mg/kg, twice a week during 3 weeks

Group 5: Phycarine[®] 500 mg/kg, once a day for 5 days

5 Herceptin 0.5mg/kg, twice a week during 3 weeks

Group 6: (reference) Paclitaxel (Mead Johnson) 16 mg/kg, once a day for 5 days.

Mice were weighed twice weekly, and tumor measurements were obtained using calipers twice weekly, starting on Day 1. These tumor measurements were converted to mg tumor weight by the standard formula, $(W^2 \times L)/2$ (2). The experiment was terminated when the control group tumor size reached an average of 500 mg. Upon termination (Day 46), the mice were weighed, sacrificed and their tumors were excised. The tumors were weighed, and the mean tumor weight per group was calculated. In this model, the change in mean treated tumor weight/the change in mean control tumor weight x 100 was subtracted from 100% to give the tumor growth inhibition (TGI) for each group.

20 Paclitaxel caused tumor regression in this tumor xenograft model. With this agent, the final weight of a given tumor was subtracted from its own weight at the start of treatment on Day 1. This difference was divided by the initial tumor weight to give the % regression. A mean % tumor regression was calculated from data from mice in a group that experienced tumor regressions.

25 The results which are expressed as mean value (standard deviation) are given in the following Table 1.

Table 1

Average daily weight of the tumor, in mg (standard deviation)						
day	Group 1	Group 2	Group 3	Group 4	Group 5	Group 6
1	40.8 (6.0)	40.3 (6.3)	40.4 (9.8)	40.3 (7.3)	40.8 (9.2)	40.4 (9.8)
5	65.0 (10.2)	60.0 (9.4)	57.1 (20.4)	63.8 (12.1)	50.8 (9.9)	39.06 (6.7)
9	105.7 (19.8)	89.9 (13.3)	79.5 (21.0)	91.4 (21.6)	61.0 (10.6)	54.2 (12.7)
12	129.9 (18.6)	110.9 (17.0)	112.4 (31.3)	133.4 (32.1)	74.3 (18.9)	62.9 (16.0)
16	175.6 (31.2)	137.9 (26.7)	172.8 (45.8)	184.6 (51.8)	91.9 (18.6)	77.3 (30.2)
19	221.8 (35.7)	204.6 (46.8)	216.5 (61.4)	195.4 (44.4)	95.4 (17.5)	79.4 (28.8)
23	255.6 (48.9)	231.3 (46.5)	263.6 (68.3)	290.3 (77.8)	134.8 (30.0)	108.0 (42.3)
26	279.2 (56.8)	272.8 (66.4)	284.6 (80.6)	295.1 (77.9)	148.1 (28.1)	123.8 (50.3)
29	324.1 (70.2)	304.7 (57.2)	313.0 (80.6)	387.4 (94.9)	168.6 (30.0)	149.5 (59.9)
32	329.9 (65.5)	346.0 (88.2)	336.5 (84.1)	401.7 (105.9)	182.8 (35.5)	188.8 (80.8)
36	394.2 (86.5)	476.0 (139.6)	419.5 (108.0)	497.1 (121.4)	242.7 (47.2)	220.3 (91.4)
39	445.7 (87.7)	489.8 (144.5)	479.9 (128.4)	602.9 (143.5)	274.3 (59.1)	244.8 (98.5)
43	477.6 (111.4)	551.1 (162.3)	553.1 (153.1)	676.4 (164.7)	333.4 (71.1)	299.6 (118.2)
46	587.1 (124.0)	727.9 (193.4)	745.0 (186.8)	907.2 (216.6)	446.6 (104.7)	376.3 (150.6)

The graphical representation was performed utilizing GraphPad Prism® software and is given on Figure 1, on which, for each group, the corresponding graph represents the weight of the tumor (in mg) in function of the day
5 (from 1 to 46).

Those results show that:

- the administration of Phycarin® 500mg/kg does not allow a limitation of the tumor growth, but on the contrary enhances the growth of the tumor;
- 10 - the administration of Herceptin 0.5 mg/kg allows a limitation of the growth of the tumor;
- the administration of Phycarin® 250mg/kg allows a limitation of the growth of the tumor which is about the same as the one obtained by administering Herceptin
15 0.5mg/kg;
- the administration of Phycarin® 500mg/kg and Herceptin 0.5mg/kg allows a limitation in the increase of the tumor weight which is far higher than the mean value obtained when administering Herceptin 0.5 mg/kg and
20 Phycarin® 500mg/kg alone; said activity on the tumor weight being even equivalent to the one obtained when administering a conventional dosage of taxol.

Example 2

Athymic female nude mice (nu/nu) between 4 and 6 weeks
30 of age weighing approximately 20g were obtained from Jackson Laboratories, USA. BT-474 human breast carcinoma cell line, obtained from the American Type Culture Collection (ATCC), in 0.1ml PBS were injected into the mammary pats of each mouse. All of the groups contained 6
35 mice. All of the animals were ear-tagged and followed individually throughout the experiment.

When tumor diameter reached 0.7 to 0.9 mm, usually 14 days after tumor cell injection, the treatment started.

The mice were administered daily for two weeks as follows:

- 5 Group 1: (control) sterile PBS, 5 times a day
- Group 2: Laminaritetraose(ip) 100 μ g/mouse,
- Group 3:Laminaritetraose(ip) 100 μ g/mouse plus Herceptin(iv) 0.5mg/kg,
- Group 4: Laminaripentaose (ip) 100 μ g/mouse,
- 10 Group 5: : Laminaripentaose (ip) 100 μ g/mouse plus Herceptin (iv) 0.5mg/kg,

Mice were weighed sacrificed two weeks after the beginning of the treatment, tumors were removed, trimmed of surrounding tissue and weighed.

- 15 The results which are expressed as mean value in mg are represented in Figure 2. On said Figure, the mean weight of the tumor for each group of mice is indicated on the ordinate as mg.

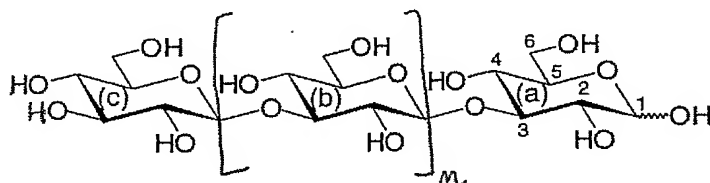
Those results show that:

- 20 - the administration of either Laminaritetraose or Laminaripentaose allows a decrease of the weight of the tumor;
- the administration of either Laminaritetraose or Laminaripentaose and Herceptin allows a decrease of the weight of the tumor which is far higher than the mean value obtained when administering Laminaritetraose or
- 25 Laminaripentaose alone.

CLAIMS

1. A therapeutical method comprising administration of a composition comprising a monoclonal antibody with an oligo- β -(1,3)-glucan and a pharmaceutically acceptable carrier, to
15 a human being or to a warm-blood animal suffering from cancer in an amount which is effective to treat the cancer.

2. The method according to claim 1, wherein the oligo- β -(1,3)-glucan is a compound presenting the following formula (1):



20

in which $n=1$ to 10, preferably, $n=2$ or 3,
or a pharmaceutical acceptable salt thereof.

3. The method according to claim 2, wherein the monoclonal antibody is any monoclonal antibody specific to
25 molecular determinants present on cancer cells and simultaneously able to activate complement.

4. The method according to claim 1, wherein the cancer is leukemia, adenocarcinoma, breast cancer, lung cancer, ovarian cancer, oesophagus cancer, gastric cancer, intestinal
30 cancer, non-Hodgkin lymphoma or colon cancer.

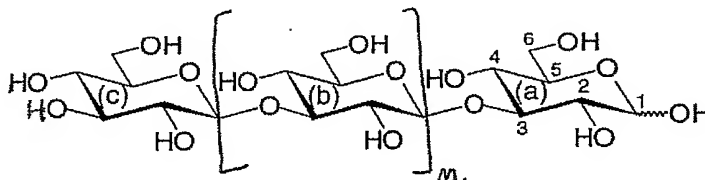
5. The method according to claim 1, wherein the monoclonal antibody an oligo- β -(1,3)-glucan are administered simultaneously, sequentially or successively.

6. The method according to claim 1, wherein the
35 composition for use in a successive, sequential or simultaneous treatment can be administered intravenously or intraperitoneally to the patient, under the form of

injections, ointment, pulmonary spray; and the composition for use in a sequential treatment can also be administered in the following way: the monoclonal antibody is administered intravenously while the oligo- β -(1,3)-glucan is administered orally to the patient, under the form of a solution, suspension, syrup, tablet, capsule.

7. The method according to claim 1, wherein the effective amount of oligo- β -(1,3)-glucan is 2 to 20mg/kg when administered orally.

10 8. Pharmaceutical composition under the form of an injection, ointment, pulmonary spray comprising a therapeutically effective amount of a monoclonal antibody and an oligo- β -(1,3)-glucan of formula (1)



15

in which $n=1$ to 10, preferably $n=2$ or $n=3$,
or a salt pharmaceutically acceptable salt thereof,
and a pharmaceutical acceptable carrier,
said composition being free of any other glucan.

20 9. Pharmaceutical composition according to claim 9, further comprising a chemotherapeutic agent.

10. A therapeutical method comprising administration of a composition comprising a monoclonal antibody with an oligo- β -(1,3)-glucan or Laminarin, and a chemotherapeutic agent and
25 a pharmaceutically acceptable carrier, to a human being or to a warm-blood animal suffering from cancer in an amount which is effective to treat the cancer.

11. A therapeutical method comprising administration of
a composition comprising a monoclonal antibody with an oligo-
 β -(1,3)-glucan or Laminarin, and a pharmaceutically
acceptable carrier, to a human being or to a warm-blood
5 animal suffering from cancer in an amount which is effective
to treat the cancer, in combination with radiotherapy.

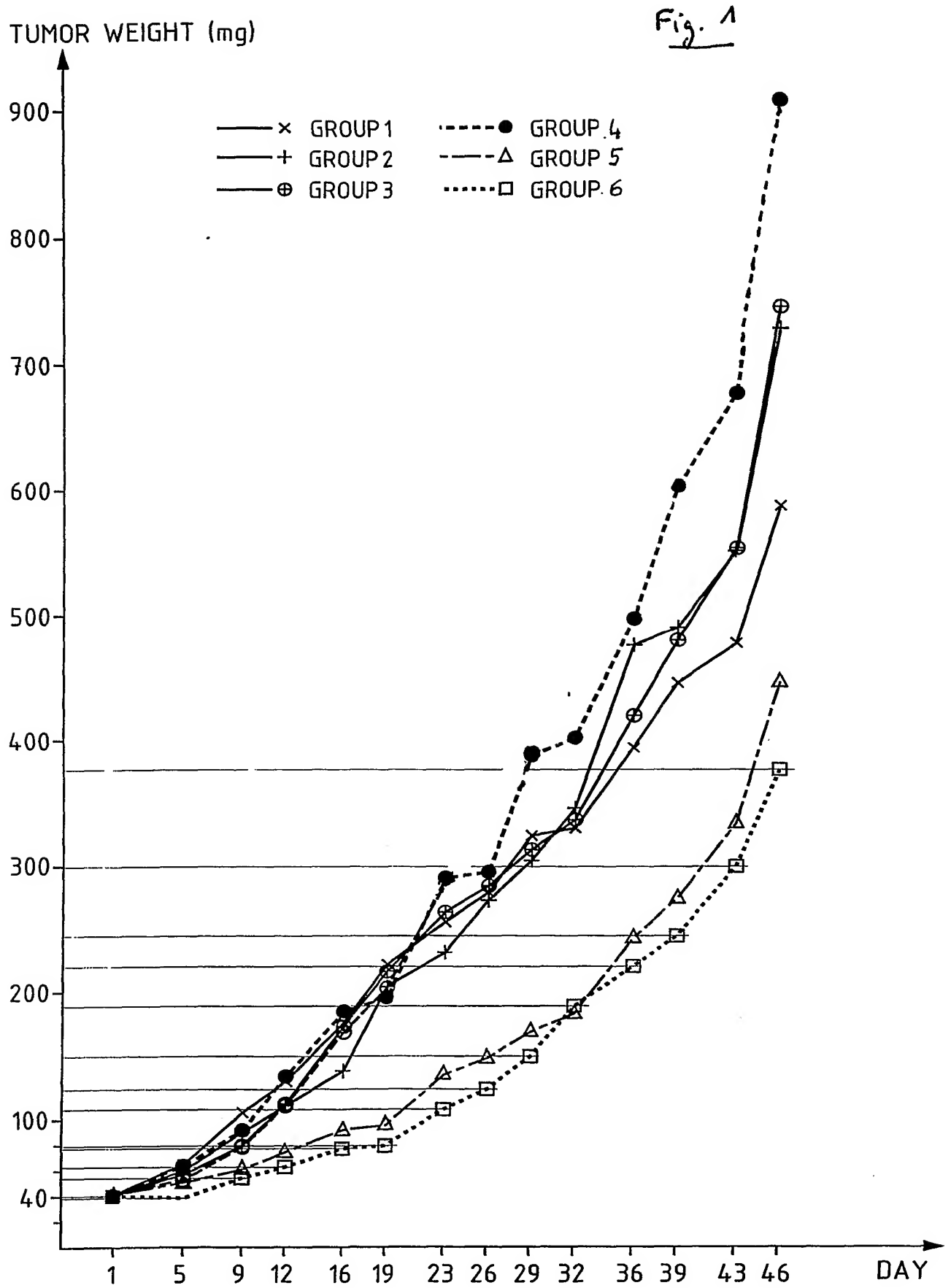
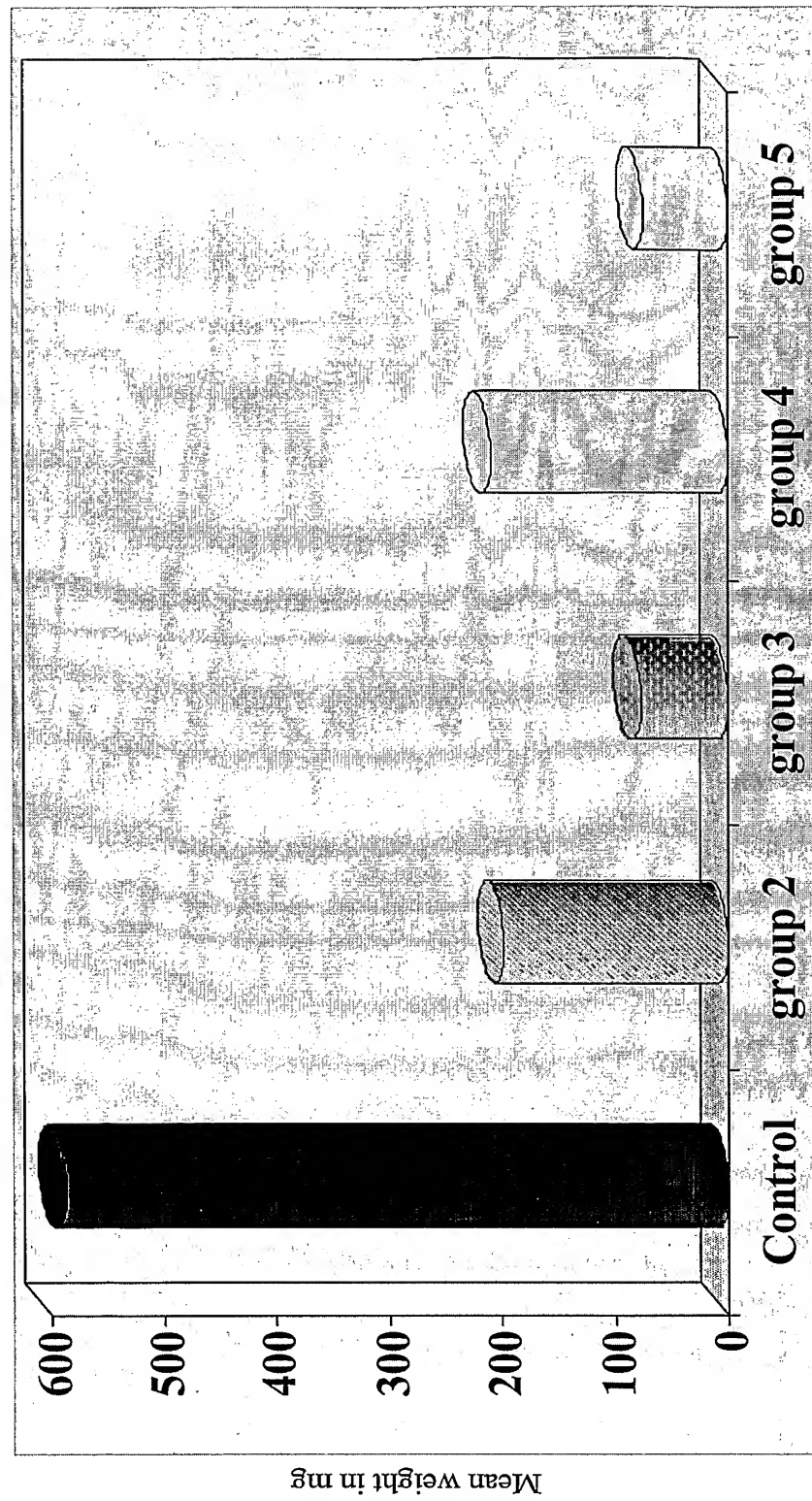


Fig.2

INTERNATIONAL SEARCH REPORT

International Application No

PCT/EP2004/013119

A. CLASSIFICATION OF SUBJECT MATTER

IPC 7 A61K31/702 A61K31/715 A61K39/395 A61P35/00
//C07K16/32

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)

IPC 7 C07K C07H A61K

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practical, search terms used)

EPO-Internal, PAJ, WPI Data, EMBASE, BIOSIS

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category *	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	N MIYANISHI ET AL: "Induction of TNF-alpha production from Human peripheral blood monocytes with heat-1,3-glucan oligomer prepared from Laminarin with beta-1,3-Glucanase from Bacillus clausii NM-1" JOURNAL OF BIOSCIENCE AND BIOENGINEERING, vol. 95, no. 2, 2003, pages 192-195, XP008043568	8
Y	see page 192, LH column, lines 18-21; page 194, LH column, lines 20-24 ; page 194, LH column, lines 42-45 ;page 194, RH column, lines 12-18.	1-7,9-11
Y	WO 98/39013 A (PEREGRINE PHARMACEUTICAL, INC) 11 September 1998 (1998-09-11) page 1	1-7,9-11

☐ Further documents are listed in the continuation of box C.

☒ Patent family members are listed in annex.

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24 February 2005

Date of mailing of the international search report

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INTERNATIONAL SEARCH REPORT

Information on patent family members

International Application No

PCT/EP2004/013119

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